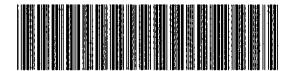
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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13 AUG 13 AH 7: 59

SECRETARY OF STATE
DIVISION OF CORPORATIONS

3-3512

AUG`1'4 2013

T. HAMPTON

CR2E027 (9/10)

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	Unified T
	closed "Application by Folice, and check are submitted
Please	return all correspondence
	Chad A
	

echnologies, LLC

Name of Limited Liability Company

reign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ed to register the above referenced foreign limited liability company to transact business in Florida..

concerning this matter to the following:

Chad Acree	
	Name of Person
Unified Techi	nologies, LLC
	Firm/Company
PO Box 9988	39
	Address
Louisville, KY	′ 40299
-	City/State and Zip Code
cacree@unifi	ed-team.com
E-mail addr	ess: (to be used for future annual report notification)
For further information concerning this matter,	please call:
Chad Acree	_{at} 502 708-3326
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle
	Tallahassee, FL 32301
Enclosed is a check for the following a	

Certified Copy

of Status & Certified Copy

Certificate of Status



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

13 AUG 13 PM 4: 16

SECRETARY OF STATE TALLAHASSEE, FLORIDA

July 31, 2013

CHAD ACREE UNIFIED TECHNOLOGIES LLC P O BOX 99889 LOUISVILLE, KY 40269

SUBJECT: UNIFIED TECHNOLOGIES OF KENTUCKY, LLC

Ref. Number: W13000025123

We have received your document for UNIFIED TECHNOLOGIES OF KENTUCKY, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

You must submit a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 813A00018467



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

13 JUL 30 AM 6: 45

SECRETARY OF STATE TALLAHASSEE, FLORIDA

April 30, 2013

CHAD ACREE UNIFIED TECHNOLOGIES LLC P O BOX 99889 LOUISVILLE, KY 40269

SUBJECT: UNIFIED TECHNOLOGIES, LLC

Ref. Number: W13000025123

We have received your document for UNIFIED TECHNOLOGIES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 113A00010306

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of Unified Technologies, LLC
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
Kentucky
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
Unified Technologies of Kentucky, LLC
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: 8/5/13
Signature(s) of Manager(s) and/or Managing Member(s):
South Many Make
<u>ω</u>

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGI LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Unified Technologies, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Unified Technologies of Kentucky, LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
₂ Kentucky 3 27-0240525
2. Kentucky (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
_{4.} 5/26/2009 _{5.} Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 9822 Bluegrass Parkway ω
Louisville, KY 40299
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
Scott Diamond, 9822 Bluegrass Parkway, Louisville, KY 40299 , MGRM
Michael Fischer, 9822 Bluegrass Parkway, Louisville, KY 40299
/IV\CFEN
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Telecommunications
Equipment Sales
Swith Morning Mela
Signature of a member or an authorized representative of a member

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Scott Diamond, Managing Member

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Comp

Unified Technologies, LLC

If unavailable, the alternate to be used in the state of Florida is:

Unified Technologies of Kentucky, LLC

2. The name and the Florida street address of the registered agent and office are:

C T Corporation	System
	(Name)
1200 S. Pine Isl	and Road
Florida Street Add	ress (P.O. Box NOT ACCEPTABLE)
Plantation	_{FL} 33324
	City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida

Statutes.

A Ecoporation System by:

(Signature) Vice President & Assistant Secretary

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 141256

Visit https://app.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

UNIFIED TECHNOLOGIES, LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is May 26, 2009 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 23rd day of July, 2013, in the 222nd year of the Commonwealth.



<u>Uisor Sundergan Orinus</u> Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

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